#### I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: DONALD H PAINTER

Electronic Signature of Signing Officer/Director Detail

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT** 

## Entity Name: ABSOLUTE VALUE, INC.

**Current Principal Place of Business:** 

610 RIVIERA DUNES WAY #505 PALMETTO. FL 34221

#### **Current Mailing Address:**

610 RIVIERA DUNES WAY #505 PALMETTO, FL 34221

### FEI Number: 65-0861242

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES, FL 33134 US

**Officer/Director Detail :** 

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Title	PD	Title	STD
Name	PAINTER, DONALD H	Name	PAINTER, DIANA M
Address	610 RIVIERA DUNES WAY #505	Address	610 RIVIERA DUNES WAY #505
City-State-Zip:	PALMETTO FL 34221	City-State-Zip:	PALMETTO FL 34221

# Certificate of Status Desired: No

PRESIDENT

04/23/2019

#### FILED Apr 23, 2019 Secretary of State 1274851353CC

Date

Date